



# *Client Services Standards for Public Health and Community Clinics*

**Community Health Nursing**

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I. PERSONNEL					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
A. The agency will hire personnel who meet minimum job qualifications.	1. Employees will have the necessary licensure, registration, certification, education, and/or experience for meeting job qualifications.	Job classification system  Personnel file  Regulatory body to verify license, registration, or certification	Documentation that the employee has the required: 1. current licensure, registration, or certification as evidenced by a copy of document or written verification from regulatory body; 2. education as evidenced by transcript; 3. job experience as evidenced by application/résumé.	Experience may be substituted for education in accordance with job classification system.  The employing agency may understaff a position provided: 1. no qualified applicant has applied; 2. employing agency has a plan for assisting the employee in meeting minimums.	See agency personnel manual and job classification system.
	2. The employee will have the knowledge, skills, and abilities necessary to perform in the position with or without reasonable accommodations.	Job classification system  Personnel file  Skills Inventory	Documentation that the employee has the required knowledge, skills, and abilities as determined and documented by the agency (may use written probationary evaluation).		Americans with Disabilities Act of 1990
	3. The agency may request other specific job skills, such as the ability to speak a foreign language.	Position description  Personnel posting	Documentation that the employee meets specific job requirements.		Americans with Disabilities Act of 1990

I. PERSONNEL					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
B. Upon employment the agency will provide each employee with an orientation to the position, job setting, and required duties.	1. The agency will provide each employee a formal, position-specific plan for orientation that will consist of: a. An organization orientation, b. A job-specific orientation, c. An individualized orientation, d. An opportunity for the employee to evaluate the orientation.	Policy/procedure manual  Personnel file	Orientation material shall include a current job description and content outline of the orientation for each job classification. An organizational chart is in the orientation packet.  Documentation may be in the form of a checklist.  There is documentation that the employee completed an evaluation of the orientation. A sample evaluation form is available.		Evaluation data should be utilized to improve the orientation for subsequent employees.
	2. The employee will complete the orientation within the probationary period of six months.	Policy/procedure manual	Documentation that the orientation was completed during the probationary period.	Length of probationary period may differ according to agency.	

I. PERSONNEL					
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C. The agency will clearly define the role of each employee.	1. The agency will provide each employee a current, written, functional job description prior to employment which identifies the duties specific to the position and job setting.	Personnel file	Documentation that employee received a current job description.		
	2. The job description will be reviewed at least annually and updated as needed.	Personnel file	The most recent job description in employee's personnel file.		
D. The agency will provide written job expectations for employee performance at specific intervals.	1. Employee and supervisor will develop measurable performance expectations within one month of employment.	Policy/procedure manual.  Personnel evaluation tool.	Personnel file will contain evidence of documentation and progress to meet performance expectations during probationary period and as designated by agency policy.		Performance expectations should be developed from the job description.
	2. Supervisor will evaluate employee performance at least annually.	Policy/procedure manual	Documentation of performance evaluation is evident in employee's personnel file.		

I. PERSONNEL					
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E. The agency will have a plan for professional continuing education (CE) which assures opportunities for employees to maintain and upgrade knowledge and skills.	1. The agency will have a continuing education plan for employees, which includes procedures for: a. designating eligible personnel, b. submitting a request c. criteria for approval/disapproval, d. reimbursement of travel, per diem and registration fees, e. employee recognition for independent CE.	Policy/procedure manual  Orientation Program  Personnel files  Agency Budget	Evidence that employees have received CE according to agency's plan.  There is money allocated for CE.		
	2. The agency will have procedures or criteria allowing for CE opportunities to employees when such CE is needed to maintain certification or employment.	Policy/procedure manual	Evidence of written CE certification.		

I. PERSONNEL					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
F. The agency will provide appropriate supervision to the employee.	1. The employee will have an immediate supervisor who oversees the job performance. In the event an employee works in more than one program, one person is designated as supervisor, and a single job description with a set of performance expectations is developed with input from appropriate individuals.	Organizational chart  Personnel file	Data sources provide evidence that: 1. lines of authority are clear, 2. the supervisor, as indicated on the organizational chart, actually performs the employee's evaluation, and supervisor is in a position to judge employee's performance.		
	2. Supervisor will have knowledge, training, and experience in supervision and in management.	Personnel file	Documentation of training, licensure and certification.	Supervisor without previous supervisory and management training receives such as soon as possible within the first two years of employment.	
G. The agency will provide opportunities for advancement in the organization.	1. The agency will provide employees access to information regarding jobs in the organization.	Agency job descriptions	Job qualifications and salary ranges are available for review on request by employees.		
	2. The agency will make available a list of vacancies within the organization.	Personnel-vacancy list	Vacancy lists are available to employees in their place of work.		

I. PERSONNEL					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
	3. Employees will be given opportunities to identify their career goals and objectives and receive support in meeting those goals if feasible.	Personnel file  Policy/procedure manual	Documentation that employees have received an opportunity to identify career goals and objectives.		
H. The agency will define channels of communication.	1. The agency will use an organizational chart which identifies each position within the organization.	Organizational chart			
	2. The agency will establish a system for internal communications, for example: a. Regular staff meetings, b. Routing of internal memos c. Routing the findings and results of QA activities d. Interdepartmental service information.  3. The agency will have a method for handling employee grievances.	Administrative files  Personnel files  Policy/procedure manual          Policy/procedure manual	Copies of minutes from staff meetings are available to employees. There is a routing system for internal memos.          A written grievance policy and procedure is available to employees.		



I. PERSONNEL					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
I. The agency will provide employees with compensation and benefits commensurate with job duties and performance.	1. The agency will review salaries every 3-5 years based on analysis of job classifications and job market,	Personnel office files Personnel manager Salary scale Policy/procedure manual	Evidence of periodic salary reviews.		
	2. The agency will have a benefits program, which may include: employee and dependent medical and dental insurance; life insurance; worker's compensation; retirement plan; sick leave, maternity, vacation, personal and holiday leave.  3. The agency will have Equal Employment Opportunity (EEO) guidelines in place.	Personnel office files  Personnel manager  Policy/procedure manual  Personnel policy manual	Copy of benefits program available to each employee.   Posters Reference Material Training for ADA	Part-time employees may be entitled to partial benefits.   Agency will follow guidelines of Acts based on the number of employees addressed in the specific Acts.	Other benefits that may be included are: employee and dependent dental insurance; disability insurance; savings investment plan; paid educational leave; and agency sponsored child care.   Texas Whistle Blower Act, Civil Rights Acts of 1964 and 1991 Americans with Disabilities Act of 1990 Rehabilitation Act of 1973 (sec. 504) Age Discrimination in Employment Act of 1967 Texas Commission on Human Rights Act of 1984 Equal Pay Act of 1963

I. PERSONNEL					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
J. The agency will provide each employee an appropriate work space to perform administrative duties and/or clinical services.	Employees will have appropriate space and equipment to perform the duties of their positions.	Observation (refer to Standard II, Clinic Setting).	Evidence that standards have been met.		
I. PERSONNEL					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
K. The agency will provide identification for every employee.	All agency staff will be appropriately identified.	Observation	Employees wear agency specific name badges with job title and applicable credentials.		Nursing Practice Act, Article 4522 requires insignia that identifies RN.  Other employees should have visible identification badges to maximize safety and security.
L. Agency will provide for nursing peer review.	Registered nurses and licensed vocational nurses reported for conduct putting clients at risk will be reviewed by a committee of nursing peers.	Peer Review Policy and Procedures	Evidence of a written peer review plan and list of persons serving on peer review committee.	Agencies with less than 10 nurses on staff are not required to provide peer review.	Vernons annotated Civil States, Article 4525a (RNs) and Article 4525b (LVNs).  Texas Administrative Code Title 22, §211.1 and §211.2 (Board of Nurse Examiners Rules and Title 22, §231.1 through 243.11 Board of Vocational Nurse Examiners Rules).



II. CLINICAL OPERATIONS					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
A. Clinics will be accessible, available, acceptable, and affordable to the target population.	1. Clinics will be located in areas convenient to the target population.	Community assessment data to include needs and available resources.  List of clinic sites  Client interviews	Review of community assessment data, a list of clinic sites and client surveys reveal that services reach the target population.		See "Outreach Standard"
	2. Clinic services will be available on days and during hours convenient to the target population.	Client surveys  Clinic schedules  Client interviews	Clinic schedules include evening and/or weekend services based on community assessment data.		Clinics should be on or near public transportation routes in areas where it is available.  There should be adequate parking.
	3. The agency will make services accessible to individuals with physical and/or mental impairment.	Description of provisions  Observation			Americans with Disabilities Act of 1990

II. CLINICAL OPERATIONS					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
B. The agency will provide clinic services in a setting designed to ensure client comfort, safety, and privacy and to expedite the work of the staff.	1. Facilities will be clean and functional and will meet the following requirements:				Sites should be selected with space available for future expansion.
	a. Doors, walls, and ceilings in good repair and free from hazardous conditions.	Observation	Observation and client surveys indicate that minimum requirements are met.		
	b. Comfortable air temperature, lighting, adequate ventilation, and cleanliness are maintained.	Client surveys			Local health and safety codes
	c. Safety standards established by the state or community. e.g., local fire and building codes.	Observation	Documented evidence of annual fire and building code inspections with a list of recommendations made and met.		Electrical outlets are sufficient to run required equipment.  Fire extinguishers are available per local fire marshall recommendations.
	d. A toilet and hand washing facility designated for client use.	Observation	Observation of designated client and staff facilities.		Where possible, the client toilet facilities should be separate from the staff.

II. CLINICAL OPERATIONS					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
	<p>e. Hand washing facilities for staff to cleanse their hands between client examinations.</p> <p>f. A utility area with necessary equipment for the safe and required cleaning of instruments and equipment, waste collection and disposal, and sterilization of instruments and supplies, refrigeration for the storage of biologicals, medications and supplies.</p> <p>g. Locked areas for storing drugs, needles, syringes, and other equipment.</p> <p>h. Facility will be smoke-free for children under age of 18.</p>	<p>Observation</p> <p>Policy/procedure manual Observation</p> <p>Observation</p> <p>Certification regarding environmental tobacco smoke</p>	<p>Presence of Hand washing facilities and practices.</p> <p>Agency policy describing the handling of bio-hazardous wastes.</p> <p>Class D Pharmacy Rules.</p> <p>Signature of authorized certifying official.</p>		<p>Texas State Board of Pharmacy Rules: Chapter 291 (Pharmacies Clinic Pharmacy Class D), January 31, 1994.</p> <p>Public Law 103-227 (Pro-Children Act of 1994 (Act)).</p>

II. CLINICAL OPERATIONS					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
	<p>2. Each site will have the appropriate medical supervision in carrying out medical care.</p> <p>3. Staff will be competent in managing emergency situations for both adults and children.</p>	<p>Policy/Procedures</p> <p>Standing Deligation Orders</p> <p>Organizational chart depicting clinical supervision</p> <p>Policy/Procedure</p> <p>Training manuals</p> <p>Personnel file</p>	<p>Standing Delegation Orders are reviewed, dated, and signed by the delegating physician(s) and staff using them at least annually.</p> <p>Evidence of staff training in emergency care for both adults and children within the last two years.</p>		<p>Board of Medical Examiners</p> <p>Standing Delegation Orders Chapter 193, June 14, 1996.</p>

II. CLINICAL OPERATIONS					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
	<p>4. Each site will be prepared to manage on-site medical, life-threatening emergencies. Each site will have:</p> <p>a. A written plan for the management of on-site medical emergencies, emergencies requiring ambulance services, hospital admission and/or hospital treatment.</p>	<p>Policy/Procedure Protocols Observation</p>	<p>Written plans and protocols for emergency situations, appropriate drugs and supplies.</p>		
	<p>b. Emergency resuscitative drugs, supplies, and equipment appropriate to the complexity of the clients served and the qualifications of the staff.</p>	<p>Observation Personnel file Protocols</p>			



II. CLINICAL OPERATIONS					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
	<p>c. Written protocols and instructions for disasters and other emergencies.</p> <p>d. Posted evacuation procedures in case of fire or other emergencies.</p> <p>e. Fire and disaster drills appropriate for local conditions will be conducted annually.</p>	<p>Policy/procedure manual</p> <p>Evacuation procedures in diagram format Observation</p> <p>Agency data</p>	<p>Written protocols</p> <p>Evacuation procedures are posted in prominent locations.</p> <p>Documentation of annual fire/disaster drills.</p>		<p>Information and instructions dealing with other emergency situations (e.g., power failure, flooding, tornadoes, robbery) should be available. Appropriate training in these areas should be provided to staff.</p>
	<p>5. Each site will have a client waiting area with space designated for intake, registration, and record processing.</p>	<p>Observation</p>	<p>Appropriate provisions are made to provide privacy in obtaining financial or other confidential information. Adequate client seating arrangements.</p>		<p>Seats should be easily cleaned. Shelves or tables for client information should be adequately stocked.</p>

II. CLINICAL OPERATIONS					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
	<p>6. Clinic will have an area for screening procedures, injections, and specimen collection.</p> <p>7. Clients will be allowed to undress/dress in privacy.</p> <p>8. Each site will have completely enclosed examining room(s) with an examining table, a chair or stool, a good source of light, a table for instruments, and a writing surface.</p>	<p>Observation</p> <p>Observation</p> <p>Observation</p>	<p>Areas are utilized for screening procedures, injections, and specimen collection.</p> <p>Evidence of accommodations for dressing/undressing. Clients are not required to sit in public waiting areas in dressing gowns.</p> <p>Evidence of appropriately equipped examining rooms.</p>		<p>See Standard IV, Client's Rights.</p> <p>It is recommended that clinic sites have at least two examining rooms to allow more efficient use of client and staff time.</p>
	<p>9. Clinic will have private rooms or areas available for interviewing, counseling, educating, and referring clients.</p>	<p>Observation</p> <p>Client survey</p>	<p>Appropriate provisions made for interviewing, counseling, educating, and referring clients..</p>		

II. CLINICAL OPERATIONS					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
	10. Clinic will arrange clinic operations to facilitate optimal client flow.	Observation  Flow chart	Evidence of clinic operations arranged to maximize utilization of space available.		
C. The agency will prevent the spread of infectious diseases and promote safe work practices in caring for clients.	1. Employees providing client services will be immunized against vaccine preventable diseases.  2. The clinic will have a system to report communicable diseases and follow up cases that threaten public health.	Employee immunization records.  Policy/Procedure Manual  Records.	Evidence of current recommended immunizations.  Documentation of a reporting system.  Evidence that reports of communicable diseases are made.  Client records contain documentation of follow-up and results.		Texas Department of Health Infection Control Manual for Public Health Clinics: TDH employee Immunization and TB skin test requirements.  Communicable Disease Prevention and Control Act (Texas Civil Statutes, Article 44196-1).
	3. Clinic will dispose of bio-hazardous wastes in a manner that minimizes risk of contamination.	Observation  Records  Policy/Procedure Manual	Puncture resistant containers that prevent leakage of fluids.  Evidence of disposal following TDH Board of Health rules.		Texas Board of Health Rules 25 TAC 1,131 - 1.137. Definition, treatment and disposition of special wastes from health care facilities.

II. CLINICAL OPERATIONS					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
	<p>4. Health care workers will adhere to universal precautions to prevent transmission of blood borne pathogens.</p> <p>5. Agency will have a plan to manage occupational exposures to blood borne pathogens.</p>	<p>Observation</p> <p>Policy/Procedures</p> <p>Training records</p> <p>Policy/Procedure</p>	<p>Evidence of employee training on infection control.</p> <p>Evidence of plan that includes orientation of employees, reporting of exposures, first aid, counseling, serological testing.</p>		<p>Section 5.05, Chapter 85, Health and Safety Code and Section 36, Chapter 14 Acts of the 72nd Legislature Regular Session, 199, House Bill 7.</p> <p>Texas Department of Health Infection Control Manual for Public Health Clinics: Post Exposure Management</p>
D. Agency will provide appropriate, quality laboratory services.	Employees providing any laboratory services will be proficient in collection and performance of laboratory procedures.	Policy/Procedure Manual Laboratory waiver	<p>Evidence of personnel training.</p> <p>Posted CLIA Waiver.</p>		Clinical Laboratory Improvements Act of 1988

III. HEALTH RECORD					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
A. The agency will have an organized client record system.	1. The record will be organized to facilitate retrieval and compilation of information.	Observation of record system	Individual records are easily retrievable.		
	2. The record will be readily accessible.	Observation of use of record system	Individual records are readily accessible to personnel using the record.		
	3. The record will be confidential and secure: <ul style="list-style-type: none"> <li>a. Safeguarded against loss or use by unauthorized persons.</li> <li>b. Secured by lock when not in use.</li> <li>c. Maintained in a secure environment in the facility as well as during transfer between clinics and between home and office visits.</li> </ul>	Policy/procedures Observation	Evidence that staff is compliant with record security.		

III. HEALTH RECORD					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
	4. The record will be available to the client upon request and with a signed release of information.	Policy/procedures Client records	Release forms available.	When releasing information relating to HIV/AIDS, the client must specify what information is to be released (e.g., lab reports, progress notes, etc.)	See Standard IV. Client's Rights, A-4.  Health and Safety Code, Ch. 85
B. The agency will have a comprehensive health and/or dental record for each client.	1. All client records will be arranged in a consistent chart order.  2. The agency will use standard chart forms in all clinic sites..	Agency policy  Client health records	  Use of standard forms and consistent organization of forms.		
C. The agency will maintain a complete and accurate record of each client's health care.	1. The client's record will include the following documentation: a. Client identification  b. Personal/ socioeconomic data  c. Primary and/or secondary language	Client health record	Evidence of complete, legible, and accurate documentation of all components.		TDH Client Record(s) and Instructions for Use.  Client Health Record and Child Health Record, with instructions, are available from TDH.

III. HEALTH RECORD					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
	d. Where and how to contact the client (to facilitate continuity of care and assure confidentiality)			See specific program standards if applicable.	
	e. Health risk assessment f. History, including health, immunization, psychosocial, and allergy histories. g. Physical examination findings. h. Results of lab/ screening tests and findings of physical examination i. Plan of care, including education/counseling and treatment j. Schedule of follow-up visits k. Referrals made and their outcome(s)	Client health record  Client health record  Client health record  Client health record  Client health record  Client health record	Allergies <u>prominently</u> noted on the client record.     Documentation of referrals.		Display a red allergy tag on outside of client record for visibility.       See tracking system

III. HEALTH RECORD					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
	l. Signed and dated entries by each provider (i.e., first initial and last name, title, month/day/year)	Client health record			
	m. Consent for services/ informed consent forms  n. A problem list to assure continuity of care  o. Progress notes  p. Indirect encounters regarding health care	Client health record  Client health record  Client health record  Client health record	All entries are legally signed and dated.  Blanks on appropriate consent form(s) are filled in, properly signed, and witnessed.  Documented use of problem list.  Evidence of documentation in progress notes.  Evidence of documentation in progress notes.		TDH guidelines for obtaining consent for services.        Telephone calls, correspondence, and other indirect encounters to client or to other providers re: client's care should be documented.



III. HEALTH RECORD					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
D. The agency will implement a policy which delineates guidelines for the release of confidential information.	1. The agency will require written consent of the client or authorized individual before releasing information.	Policy/procedure manual  Client record  Release of information form	Release of information documented in the client health record.	Subpoenaed records.	Texas Revised Civil Statutes, Annotated Article 4495, Section 5.08 1994
	2. Release form will include the specific information the client desires to be released.	Client record	Release of information form should be signed and dated by client.		Clients transferring to other providers should be provided a copy of their record upon request with a release signed by client.  Agencies should release only the information requested.
	3. Information collected for reporting purposes will be disclosed only in summary, statistical, or other form which does not identify particular individuals.	Published statistical reports	No evidence of individual identity in statistical reports.	Legally reportable communicable disease or other conditions.	See Client's Rights, Standard IV, F.

III. HEALTH RECORD					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
E. The agency will have a written policy regarding retention and proper disposal of clients' records.	1. The policy will specify length of retention and acceptable method(s) of disposal.	Policy/procedure manual	Documentation that policy is followed.		TDH Retention of Medical Records, Screening Test Results and other Forms. L-32 (CHR-1996).
IV. CLIENT RIGHTS					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
A. The agency will provide services in a timely manner.	1. The agency has a triage system to prioritize clients' needs.  2. A policy is in place which delineates the timely provision of services.	Policy/procedure manual  Clinic observation  Client satisfaction surveys	Clinic observation and results of client surveys reveal timely provision of services according to agency policy.	Program specific standards for the provision of timely services may vary according to programs.	Staggered appointment schedules are preferable to "first come first serve" block appointments. Immunizations should be available without appointments. Preventive health services should be provided within two weeks of request and acute care services should be provided based on client's condition.

IV. CLIENT RIGHTS					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
B. The agency will provide services in a nondiscriminatory manner.	The agency will have a written policy that prohibits discrimination on the basis of race, color, ethnicity, national origin, religion, age, sex, or disability.	Policy/procedure manual	Posters displayed in a public viewing area in appropriate language. Educational brochures.		The Civil Rights Acts of 1964 and 1991  The Americans with Disabilities Act of 1990  Program specific guidelines may include additional categories of nondiscrimination.
C. The agency will provide services to individuals according to income guidelines.	The agency has a written policy that assures access to services for clients regardless of their ability to pay.	Policy/procedure manual	Evidence of a policy that prohibits coercion of clients into services.  A sliding fee scale is in place.	Immunizations will not be denied for inability to pay or for residency requirements.	Income and/or residential eligibility may be imposed based on local government and/or program specific restrictions.
D. The agency will not coerce individuals into services; nor must participation in one service/program be an eligibility requisite for another.	1. The agency will have a policy that prohibits coercion of clients to receive services.	Policy/procedure manual  Observation  Client interviews	Results of client interviews.	Program policies for Communicable Diseases.	

IV. CLIENT RIGHTS					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
E. The agency will provide services in such a way that they can be understood by the client.	1. Agency policy describes procedures for appropriate means of communication.	Policy/procedure manual	Written procedures for language and hearing impaired translation.		
	2. The agency will provide appropriate interpreter services for non-English speaking clients or clients with other special communication needs.	Translated materials.  Clinic observation	Translated materials are available.		
	3. Communication will be conducted according to the client's level of understanding.	Samples of educational materials.  Clinic observation			
	4. Communication needs will be considered when making referrals.	Observation			
F. Agency will afford clients the opportunity to express concerns about care received or rights violated.	Agency informs clients of a procedure to follow when care is not acceptable or rights may have been violated.	Policy/procedure manual	Evidence of client education Posters accessible to clients Client Satisfaction surveys Evidence of formal grievance/ complaint procedure.		



V. COORDINATION OF COMMUNITY SERVICES					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
A. The agency will provide health services based upon community needs.	1. Agency will determine community needs/resources based on data collected through community assessments.	Written community needs assessment  Public Surveys  Minutes from community meetings	Documentation of a complete community assessment including demographic/socioeconomic data; health data; health systems data and survey data.  Membership in coalitions and partnerships with community organizations.  Demonstrated participation as evidenced in minutes of community meetings.  Evidence that assessment is shared with local government and with the community.		Updating data every year is recommended.
	2. Agency will review and update data at least every two years.	Community Assessment plan	Documentation demonstrating biennial review and updating of data.		

V. COORDINATION OF COMMUNITY SERVICES					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
B. The agency will coordinate its services with other community agencies in an effort to facilitate the public's access to community services and to prevent duplication of efforts.	1. The agency will establish partnerships and will maintain linkages with other programs and providers.	Policy/procedure manual  Minutes of meetings	Evidence of: a written plan for interagency collaboration; agreements with other providers or programs; meetings involving other community providers, including issues and actions.		Services to be listed may include: shelters, clothing, food, mental health, dental health, crisis hotline numbers, protective, legal, educational, translation, transportation and primary, secondary, and tertiary medical services.  See Continuity of Care, Standard B.
	2. The agency will maintain updated directories of services available in the immediate community and at primary, secondary, and tertiary levels statewide.	State, regional, and community resource directory(ies).	A directory available to all staff.		
	3. The agency will maintain a client referral and tracking system.	Policy/procedure manual  Client health records	Documentation describing the agency's tracking and referral systems.  Documentation of referral outcome in client's record.		

V. COORDINATION OF COMMUNITY SERVICES					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
C. The agency will inform the community of services.	1. The agency will make information about agency services available to the public through various media.	Policy/procedure manual  Public awareness materials	A written policy for media releases or other methods of distributing information is recorded with documentation of implementation.		Brochures, leaflets, posted clinic schedules, handouts, speaker's bureau, public services announcements, home visits.
	2. The agency will translate public awareness materials into appropriate languages whenever possible.	Policy/procedure manual	Materials are catalogued and maintained within the agency.		Americans with Disabilities Act of 1990  Agency should maintain updated list of translators or translation services available in the community. When appropriate, signs should be placed in clinic regarding need to bring translator.
	3. The agency will distribute information about services to other organizations and agencies that deal with potential clients.	Plan for distributing public awareness materials.	Evidence agency uses plan for distributing public awareness materials.		



V. COORDINATION OF COMMUNITY SERVICES					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
D. The agency will have a community education/outreach program	1. The agency will have an education/outreach program that teaches the benefits of preventive health services.  2. The agency provides education/outreach in clients' environment, e.g., schools, churches.	Agency Records	There is a written community education/outreach plan and documentation of community education activities.		

VI. CONTINUITY OF CARE					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
A. The agency will make case management services available for all clients.	1. The agency will have a method for assessing risk and identifying individuals who are priorities for care.	Policy/procedure manual	Documentation of a risk assessment, a comprehensive needs assessment, service plan development and implementation, monitoring, and reassessment. Documentation of community education activities.		Risk assessment tools  Program-specific guidelines and tools  Case management operating instructions
	2. Case management services will be directed by qualified case managers who may be assisted by community outreach aides and other personnel.	Client record  Written protocol			
	3. The agency employs case managers that are:	Personnel files	See Personnel I A evaluative criteria.	Staff qualifications for case management services may vary according to programs.	
	a. Registered nurses (R.N.) with Texas licensure and a minimum of one year experience in community health nursing, or  b. Licensed social workers (L.S.W.) licensed in Texas with a minimum of one year experience in health and/or human services.	Application/résumé			

VI. CONTINUITY OF CARE					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
	4. A case manager directs case management that is responsible for: <ul style="list-style-type: none"> <li>a. coordination of resources</li> <li>b. outreach</li> <li>c. community and individual education</li> <li>e. tracking activities; and</li> <li>d. home visits.</li> </ul>	Client record	Evidence that clients receive case management services.		
B. The agency will have an organized tracking system which assures continuity of services and followup.	1. The clinic will have a system for monitoring clients' health status and use of the health care system.  2. The clinic will have a system to monitor missed appointments.	Written protocol  Policy/procedure manual  Tickler file  Client record  Appointment book  Tickler file  Client record  Logs	Documentation of client contacts scheduled according to program guidelines.  Documentation of appropriate referrals made and documentation of follow up.  Evidence of a system for monitoring missed appointments.  An acceptable show rate is defined by the agency.		

VI. CONTINUITY OF CARE					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
	3. The clinic will have a system to follow-up conditions identified as priorities for care.	Policy/procedure manual	A written policy states that staff will be responsible for follow-up of conditions that deviate from normal.		It is recommended that a referral form be used.
		Client record	Documentation indicates that follow-up by appropriate staff has been provided.		
		Protocols for specific condition	Written protocols are established for specific conditions.		
	4. The clinic will have a system to track referrals made to other providers/agencies.	Policy/procedure manual	A written policy addresses tracking of referrals made to other agencies.		
		Client record	Documentation indicates that a follow-up system is being utilized.		

VII. QUALITY ASSURANCE					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
A. The agency will develop and implement a plan for internal review and evaluation of its services to assure the provision of quality services and compliance with basic and program standards.	1. The agency's plan will establish the frequency of internal review and evaluation.	Agency plan  Evaluation reports	Evidence of a written plan.  Documentation of past reviews and evaluations.		Guidelines for quality assurance are available from USDHHS, NLN, APHA, ANA, ADA, TDH, Standards for Pediatric Immunization Practices.  Internal audits should be performed.
	2. The agency plan will identify individuals responsible for internal review and evaluation.	Agency plan	Agency plan indicates what roles individuals assume in review process.		
	3. The agency's plan uses forms/tools to review and evaluate services.	Evaluation tool/forms	Documentation of past reviews and evaluations.		Standardized tools/forms are recommended to assure completeness and consistency of reviews and evaluations.

VII. QUALITY ASSURANCE					
STANDARD STATEMENT	STANDARD COMPONENTS	DATA SOURCE	EVALUATIVE CRITERIA	EXCEPTIONS	REFERENCES/ RECOMMENDATIONS
	<p>4. The agency's plan includes the following areas for review and evaluation:</p> <ul style="list-style-type: none"> <li>a. administrative policies</li> <li>b. budget</li> <li>c. provision of clinical services               <ul style="list-style-type: none"> <li>1) observation</li> <li>2) record review</li> </ul> </li> <li>d. physical facilities</li> <li>e. client satisfaction</li> <li>f. clinic systems</li> </ul>	Agency plan	<p>Agency plan indicates areas to be reviewed and evaluated.</p> <p>Evidence of criteria/ standards for review.</p>		
	<p>5. The agency's plan will include an evaluative report of findings and recommendations for improving services.</p> <p>6. The agency's plan includes an action plan to correct or improve services/systems.</p> <p>7. The agency will review progress of action plan to correct/improve services.</p>	<p>Evaluation reports</p> <p>Action plan</p> <p>Action plan</p> <p>Observation of services</p>	<p>Documentation of past evaluations.</p> <p>Documentation and time-frame for implementation of action plan.</p> <p>Observation of services or documentation indicates implementation of action plan.</p>		<p>The evaluation of findings should be completed and submitted to the agency's director. Findings will be shared with staff.</p> <p>The plan for corrective action should be initiated as soon as possible.</p>